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PTO/SB/82 (04-05)
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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/648,582
Filing Date	08/25/2000
First Named Inventor	Clint Ashford
Art Unit	3626
Examiner Name	Natalie Pass
Attorney Docket Number	MDLN.P001

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

53186

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

53186

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Date

Telephone

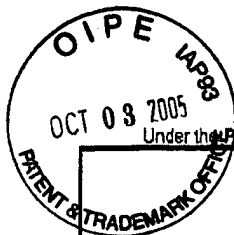
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/96 (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Clinton B. Ashford, MDApplication No./Patent No.: 09/648,582 Filed/Issue Date: 08/25/2000Entitled: METHOD AND APPARATUS FOR PROVIDING INCENTIVES TO PHYSICIANS

Clinton B. Ashford, a Individual
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
 The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: C. Ashford, J. Sultan To: Celadon Health Inc.

The document was recorded in the United States Patent and Trademark Office at
 Reel 011515, Frame 0234, or for which a copy thereof is attached.

2. From: Celadon Health Inc To: Clint Ashford

The document was recorded in the United States Patent and Trademark Office at
 Reel 016229, Frame 0673, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
 Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Clinton B. Ashford
 Signature

Clinton B. Ashford
 Printed or Typed Name

Individual Owner of Patent
 Title

9-29-05
 Date

706-353-2530
 Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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APRIL 30, 2001

PTAS



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PILLSBURY WINTHROP, LLP
DAVID A. JAKOPIN
1100 NEW YORK AVENUE, N.W.
9TH FLOOR, EAST TOWER
WASHINGTON, DC 20005-3918

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RECORDATION DATE: 02/12/2001

REEL/FRAME: 011515/0234
NUMBER OF PAGES: 2

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:
ASHFORD, CLINT M.D.

DOC DATE: 02/05/2001

ASSIGNOR:
SULTAN, JAY

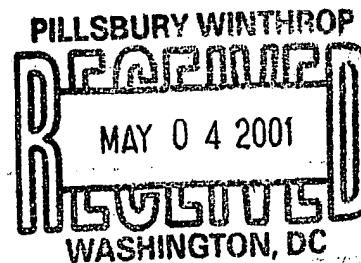
DOC DATE: 02/05/2001

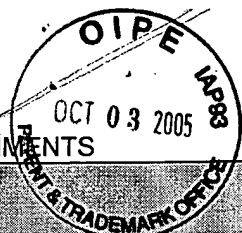
ASSIGNEE:
CELADON HEALTH, INC.
2006 PIERCE STREET
SAN FRANCISCO, CALIFORNIA 94115

SERIAL NUMBER: 09648582
PATENT NUMBER:

FILING DATE: 08/25/2000
ISSUE DATE:

DOROTHY BASMA, PARALEGAL
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS





02-21-2001



101617870

ONLY



TO THE HONORABLE COMMISSIONER OF PATENTS AND TRADEMARKS:

SIR: Please record the enclosed original documents or copy thereof.

2-12-01

1. NAME OF CONVEYING PARTYIES (ASSIGNORS):

a. Clint Ashford, M.D.

b. Jay Sultan

Additional names of conveying parties enclosed?



NO



YES

2. PARTY(ASSIGNEE) RECEIVING INTEREST:

NAME: Celadon Health, Inc.

2006 Pierce Street

ADDRESS: San Francisco, CA 94115

02/16/2001 BNGUYEN1 00000124 09648582

05 FC:581

40.00 OP

Additional names and addresses enclosed?



NO



YES

3. NATURE OF CONVEYANCE:

(Submit only one document for recordation--multiple copies of same Assignment signed by different inventors is one document)



Assignment of



Whole



Part interest

Execution date: Feb 5, 2001



Change of name



Patent Application



Security



Merger



Other:

4. Execution date/s on Declaration (if filed herewith):

4.5 Appl/Pat Nos.: others on additional sheets enclosed?



NO



YES

A. Pat. App. No/s	Matter #	1st inventor if not in item 1	B. Patent No(s)	1st inventor if not in item 1
09/648,582	0269901			

5. Name and address of party to whom correspondence concerning document should be mailed:

Pillsbury Winthrop, LLP
1100 New York Avenue N.W., 9th Floor, East Tower
Washington, D.C. 20005-3918

5.5 ATTY DKT: 018624

0269901

CD-001

6. NUMBER INVOLVED:

Appls: 1 + Pats: 0 = TOTAL 1

7. Amount of fee enclosed (Code 581):
Above Total x \$40 = \$40.008. If above fee is missing or inadequate, charge
insufficiency to DEPOSIT ACCOUNT NO. 03-3975

UNDER ORDER NO.: 0269901

MATTER NO.

CLIENT REF.

dup. sheet not required

CLIENT/MATTER

9. STATEMENT AND SIGNATURE. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Signature

10. Total pages including this cover sheet and document: 2

Atty: David A. Jakopin, Reg. No. 32,995
Tel: (650) 233-4790 Fax: (650) 233-4545Date: February 7, 2001
Atty/Sec: DAJ/jw-c

Please return recorded to:
Pillsbury Winthrop LLP
Ninth Floor, East Tower
1100 New York Avenue, N.W.
Washington, D.C. 20005-3918

Atty Dkt : 018642/269901
Client Ref: CD-001

ASSIGNMENT
of U.S. Origin Patent Application

WHEREAS, the undersigned, to wit: **Clint ASHFORD, M.D. and Jay SULTAN**, (hereinafter ASSIGNOR), has made an invention entitled, *Method and Apparatus for Providing Incentives to Physicians*, for which an application for Letters Patent of the United States was filed in the United States Patent and Trademark Office on August 25, 2000, under Serial No. 09/648,582; and

WHEREAS, **CELADON HEALTH, INC.**, ASSIGNEE, a corporation duly organized and existing under the laws of the State of Delaware and having its principal office and place of business at 2006 Pierce Street, San Francisco, CA 94115, desires to acquire an interest therein;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, said ASSIGNOR does hereby sell, assign and transfer unto ASSIGNEE, its successors, assigns and legal representatives, the full and exclusive right, title and interest to the said invention in the United States and all foreign countries, as described in the aforesaid application, and to the said application and to all continuations, divisions, reissues and substitutes of said application, together with the right of priority under the International Convention for the Protection of Industrial Property, Inter-American Convention Relating to Patents, Designs and Industrial Models, and any other international agreements to which the United States of America adheres, and ASSIGNOR hereby authorizes and requests the Commissioner of Patents to issue said Letters Patent to ASSIGNEE, for its interest as ASSIGNEE, its successors, assigns and legal representatives.

AND ASSIGNOR hereby agrees to execute any papers requested by ASSIGNEE, its successors, assigns and legal representatives, deemed essential to ASSIGNEE's full protection and title in and to the invention hereby transferred.

ASSIGNOR furthermore agrees upon request of said ASSIGNEE, and without further remuneration, to execute any and all papers desired by said ASSIGNEE for the filing and granting of foreign applications and the perfecting of title thereto in said ASSIGNEE.

NOTE:


The undersigned hereby authorizes Pillsbury Winthrop LLP, of the above address, to insert further identification necessary or desirable for recordation of this document.

Executed on the date below indicated.

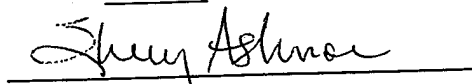
Signature

Date Signed

Witness


Clint ASHFORD, M.D.

2-5-01



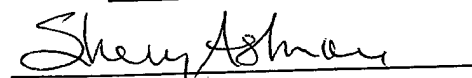
Signature

Date Signed

Witness


Jay SULTAN

2/5/01





UNITED STATES PATENT AND TRADEMARK OFFICE

UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND
DIRECTOR OF THE UNITED STATES PATENT AND TRADEMARK OFFICE

JULY 07, 2005

DERGOSITS & NOAH LLP
GEOFFREY T. STANIFORD
FOUR EMBARCADERO CTR. #1450
SAN FRANCISCO, CA 94111

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RECORDATION DATE: 02/07/2005

REEL/FRAME: 016229/0673
NUMBER OF PAGES: 2

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

CELADON HEALTH, INC.

DOC DATE: 12/14/2004

ASSIGNEE:

CLINTON B. ASHFORD, M.D.
1750 SOUTH LUMPKIN STREET
ATHENS, GEORGIA

SERIAL NUMBER: 09648582

FILING DATE: 08/25/2000

PATENT NUMBER:

ISSUE DATE:

TITLE: METHOD AND APPARATUS FOR PROVIDING INCENTIVES TO PHYSICIANS

RHONDA NICOL, SUPERVISOR
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS

217105

02-09-2005

Form PTO-1595 (Rev. 06/04)
OMB No. 0651-0027 (exp. 6/30/2005)U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

RECC

102936761
PATENT

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):

Celadon Health, Inc.

Execution Date(s) December 14, 2004Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Government Interest Assignment
☐ Executive Order 9424, Confirmatory License
☐ Other _____

2. Name and address of receiving party(ies)

Name: Clinton B. Ashford, M.D.

Internal Address: _____

Street Address: 1750 South Lumpkin StreetCity: AthensState: GeorgiaCountry: USA Zip: _____Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application or patent number(s):

☐ This document is being filed together with a new application.
A. Patent Application No.(s) B. Patent No.(s)

09/648,582

Filed: August 25, 2000

Additional numbers attached? ☐ Yes ☒ No

5. Name and address to whom correspondence concerning document should be mailed:

Name: Dergosits & Noah, LLP

Internal Address: _____

Street Address: Four Embarcadero Ctr, #1450City: San FranciscoState: California Zip: 94111Phone Number: 415-705-6377Fax Number: 415-705-6383Email Address: gstaniford@dergnoah.com

6. Total number of applications and patents involved:

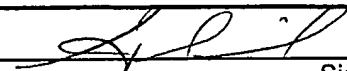
17. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

- ☐ Authorized to be charged by credit card
☐ Authorized to be charged to deposit account
☒ Enclosed
☐ None required (government interest not affecting title)

8. Payment Information

a. Credit Card Last 4 Numbers _____
Expiration Date _____b. Deposit Account Number 04-0822Authorized User Name Geoffrey Staniford

9. Signature:



Signature

February 3, 2005

Date

Geoffrey T. Staniford, Reg. No. 43,151

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents: 2Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, V.A. 22313-1450

Attorney Docket No. 716.02

02/08/2005 09:54:48
01 FEB-7 PM 1:11
OPR/FINANCE

ASSIGNMENT

WHEREAS, Celadon Health, Inc., hereinafter referred to as "ASSIGNOR", is the owner of certain new and useful improvements as described and set forth in the below-identified application for United States Letters Patent:

Title of Invention: METHOD AND APPARATUS FOR PROVIDING INCENTIVES TO PHYSICIANS

Date of Execution: Dec. 14, 2004

Filing Date: August 25, 2000

Serial No.: 09/648,582

WHEREAS, Clinton B. Ashford M.D., an individual resident of the State of Georgia, with offices at 1750 South Lumpkin Street, Athens, GA, hereinafter referred to as "ASSIGNEE", is desirous of acquiring the entire right, title and interest in and to said invention and application and in any Letters Patent which may be granted on the same;

NOW, THEREFORE, TO ALL WHOM IT MAY CONCERN: Be it known that, for One Dollar (\$1.00) and other good and valuable considerations, receipt of which is hereby acknowledged by Assignor, Assignor has sold, assigned and transferred, and by these presents does sell, assign and transfer unto the said Assignee, and Assignee's successors and assigns, all right, title and interest in and to the said invention, said application for United States Letters Patent, and any Letters Patent which may hereafter be granted on the same in the United States and all countries throughout the world including any divisions, renewals, continuations in whole or in part, substitutions, conversions, reissues, prolongations or extensions thereof, said interest to be held and enjoyed by said Assignee as fully and exclusively as it would have been held and enjoyed by said Assignor had this assignment and transfer not been made, to the full end and term of any such Letters Patent.

Assignor further agrees that Assignor will, without charge to said Assignee, but at Assignee's expense, cooperate with Assignee in the prosecution of said application and/or applications, execute, verify, acknowledge and deliver all such further papers, including applications for Letters Patent and for the reissue thereof, and instruments of assignment and transfer thereof, and will perform such other acts as Assignee lawfully may request, to obtain or maintain Letters Patent for said invention and improvement in any and all countries, and to vest title thereto in said Assignee, or Assignee's successors and assigns.

IN TESTIMONY WHEREOF, Assignor has hereunto signed his name to this assignment on the date indicated below.

Date: December 14, 2004

Celadon Health, Inc.

By: Bob Desmond
Bob Desmond, Vice Chairman of the Board
of the Directors

STATE OF _____)
COUNTY OF _____) ss.

On this 14 day of December, in the year of 2004, before me, the undersigned notary public, personally appeared the above-named assignor, or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same in his authorized capacity and that by his signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

Witness my hand and official seal.

SHERRY ASHMORE
NOTARY PUBLIC
OCONEE COUNTY, GA
COMMISSION EXPIRES JUNE 13, 2005

Sherry Ashmore
Notary Public

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